

BUILDING OFFICIAL CERTIFICATION COMMITTEE'S - ATTACHMENT C
Building Code Enforcement Official - Training Report Discrepancy Form

Please print clearly or type requested information.

Last Name	First Name	Municipality
Mailing Address		Email
City/Town	State	Zip Code
(____) _____ Telephone	(____) _____ Fax Number	

Please indicate in the areas below, any approved training which you feel was omitted from your report. **Please provide the date, name of the course, and number of contact hours assigned to the course.** We will research our records and correct your training report if credit was not given due to an oversight in the data entry process. If we require additional information in order to correct your training report, we will contact you in writing.

In order to expedite the correction, please provide us with any proof of attendance you may have for a course entered below and the date attended.

Please Print or Type Clearly:

<u>COURSE NAME / NAME OF ASSOCIATION</u>	<u>DATE OF SEMINAR / TRAINING</u>
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***Please attach proof of attendance unless course was sponsored by an association and a sign in sheet was provided.**

Information filled in above must have been previously approved. Please refer to the "Building Official Certification Committee's Policy for Maintenance of Certification Status" for the procedure to *apply* for credit for a course of instruction.

Please fax to 508-422-1954 or email this form and any attachments to: Kimberly.spencer@state.ma.us or mail to: Department of Public Safety, Attn: Kimberly Spencer, 50 Maple Street – Suite One, Milford, MA 01757-3698